

ISSUE SLIP STAPLE AREA (for additional sheet references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
C.A.P.E. CLASSIFIER			
FORMALITY REVIEW		10	1-27-61
RESPONSE FORMALITY REVIEW			02/20/61

INDEX OF CLAIMS

Rejected M Non-elected
 Allowed I Interference
 (Through number of) Canceled A Appeal
 Restricted G Objection

Claim	Date	Claim	Date	Claim	Date
1		1		1	
2		2		2	
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If more than 150 claims or 10 actions
 staple additional sheet here

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